



## ***HealthCAWS® Accountability & Support Platform***

### ***An Action-oriented Customizable Portal***

**Addressing Consumer  
Engagement in a Rapidly  
Evolving Health Care  
Environment with CeRT™**



***Presented Annual KHIE eHealth Summit***

***September 17 , 2014***

***Rose Maljanian Chairman & CEO  
HealthCAWS, Inc.***



# Environment Mega Trends: Here We Go Again

- **ACA Known Facts**

- Exchange sites cost way too much with many failures
- Subsidy criteria questionable or not verifiable in millions
- Young vulnerables did not enroll at expected rates causing disruption in risk pools
- Delays and exemptions creating administrative chaos and cost

- **Still To Be Verified**

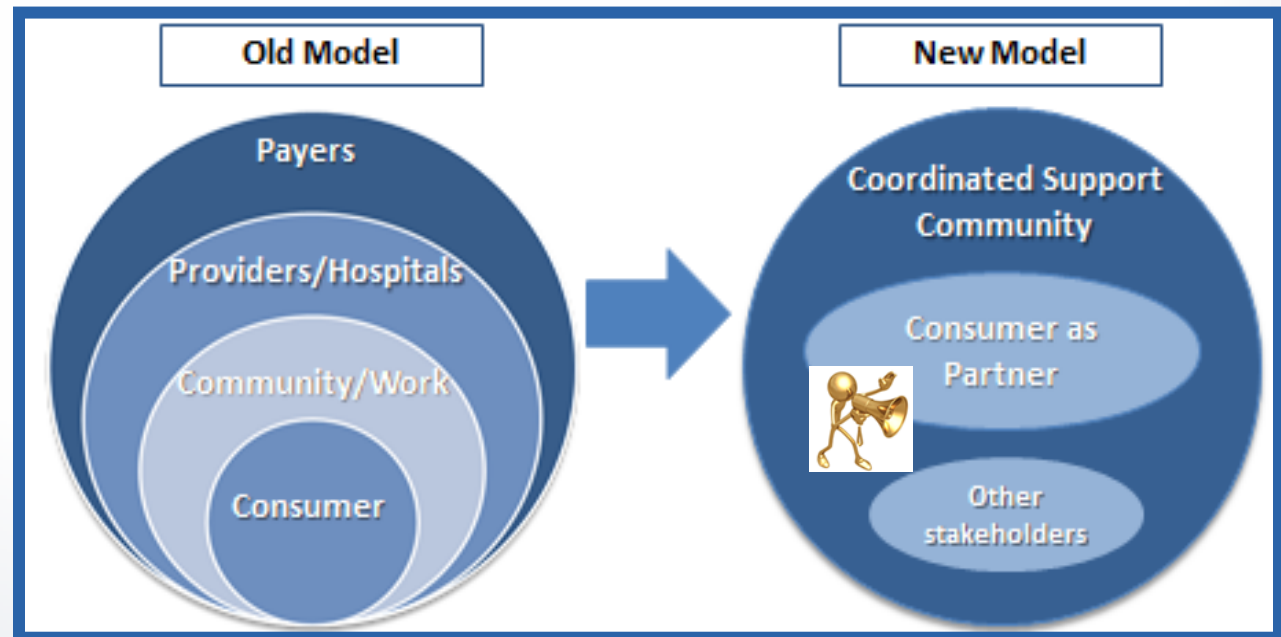
- Will narrow networks continue to limit consumer choice
- Will providers balk at participating when rates don't work
- Will enrollees renew given signals that higher OOP costs before meeting deductibles already have them scratching their heads
- Will cost shifting to commercial payers ramp up again

***BOTTOM LINE: BACK TO DOUBLE DIGIT PREMIUM INCREASES***

***CHALLENGE: CONSUMER TRUST EROSION MEANS WE NEED MORE THAN EVER TO ENGAGE***

# Why Focus Solutions on an Effective Consumer Engagement Strategy?

- Consumers are the end user for all clients and consumer behavior significantly contribute to health & cost outcomes
- Quantifying outcomes, i.e. value to clients, is dependent on consumers contributing data
- Revenue & financial stability tomorrow is dependent on a positive consumer experience today

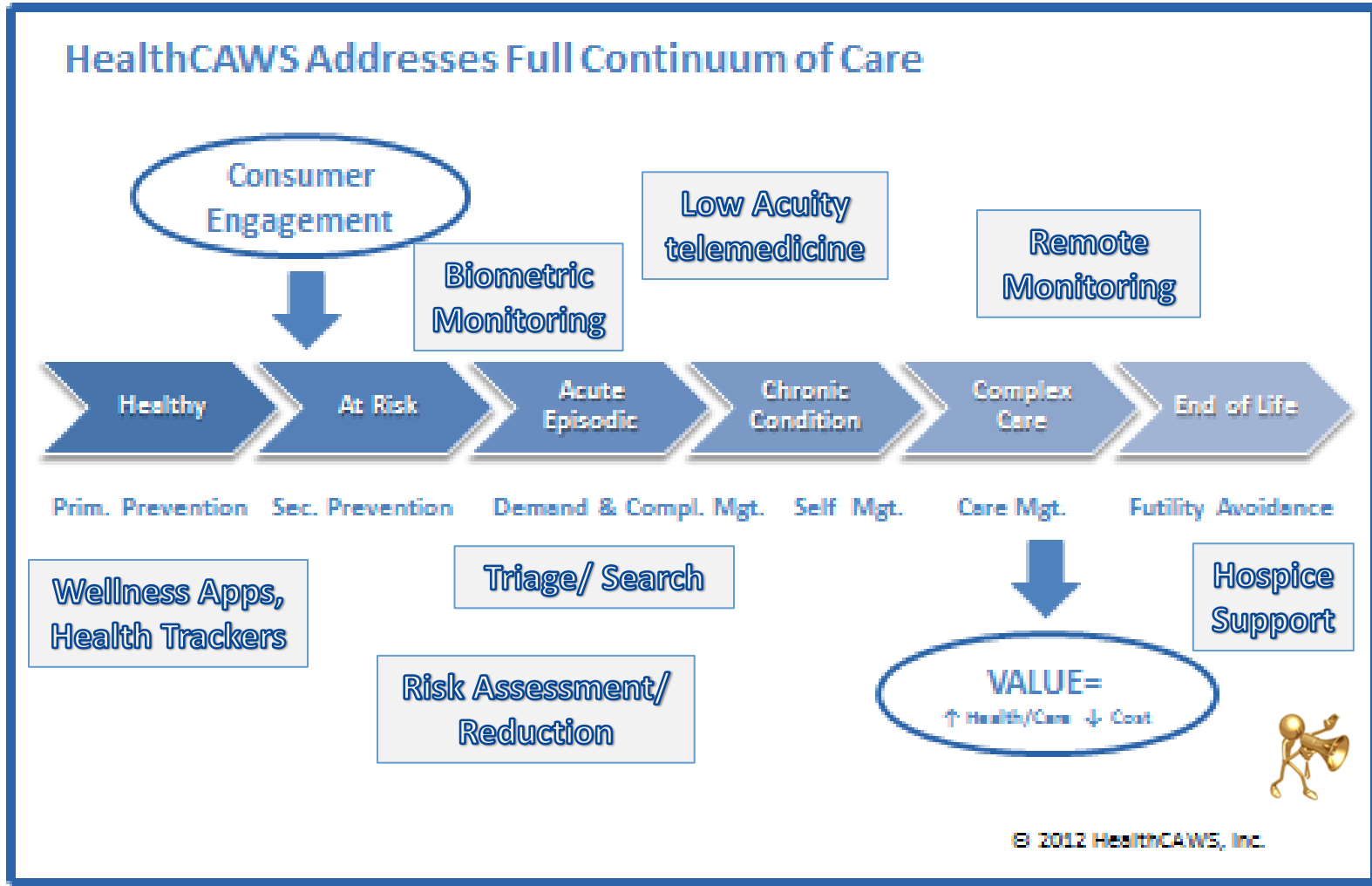


# Environment-Mega Trends Tied to Consumer Engagement By Stakeholder


- **Providers Movement Away from FFS to Pay for Value** Risk performance/quality risk to fully capitated financial risk. Engaging consumers in population health a must to succeed
- **Health Plan Repositioning** Maintaining relevance with consumers beyond admin functions. Insourcing consumer touch points and ↑ing support for individual purchaser
- **Employers Spend and Human Capital Focus** Better programs-engage, reduce costs, ↑ productivity plus talent acq. and what makes sense to cover/cost share
- **Pharmas** Fewer blockbuster drugs, > shift to generics, need for new angles that help consumer problems
- **Non Traditional Providers** New and bigger roles



# Leverage Continuum of Care & Create Impact



# What Factors will Accelerate Uptake in Consumer eHealth Solutions and Create Loyalty?

5 C's of Healthcare Consumerism (1)	HealthCAWS Drivers of Use by Consumers (2)	Think in Terms of What <u>They</u> Want?
Choice	Ease of Access	What kind of hoops do I have to go through to gain access or set-up. Is there a fee?
Convenience		
Collaboration	Work Required	How much information do I have to put in and how often?
Comfort	Value Out 	Am I getting financial rewards or savings? Am I getting information I can't get elsewhere, connect to people or things? Does it save me time or make me feel better?
Cost		

(1) KizerK SoCAHIMSS April 10, 2013 (2) HealthCAWS 2013



# Positioning: Why Technology –The VOI?

- **Convenience and improved outcomes for consumers**

- Otherwise seek care reactively or not at all
- Lost time and opportunity cost, live life
- Stickiness with the system



- **Extend reach of clinicians and facilities**

- More active participation
- Get in front of /avoid complications mod/high risk groups
- Keep the relatively well, well with low touch tools

- **Reduce administrative costs**

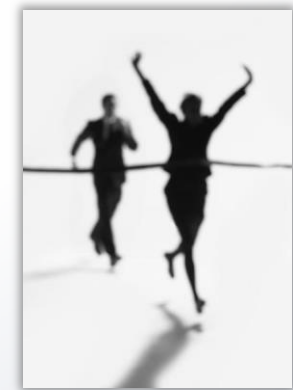
- Lower unit costs staff time per pt
- Limit mailers/movement of paper

## Select References:

- 1) Med Internet Res. 2013 May; 15(5): e95. Published online 2013 May 21 [2\) Diabetes Technol Ther.](#) 2013 May;15(5):434-8..3) J Med Internet Res. 2013 January; 15(1): e6. Published online 2013 January 8.

# What Will It Take to Get There as an Industry?

- Maximize all consumer e-touch points
- Offer a full continuum of tools and programs to accommodate all consumer level of need
- Use a multifaceted e-approach to engage and make everything easy to access and use
- Focus on adding value to consumers
- Map all efforts to targeted outcomes measures and continuously improve





# Meaningful Use Recommendations Spring 2014

## 4 Categories of Objectives\*

Improving Quality of Care and Safety

Engaging Patients and Families in their Care

- View, download, transmit
- Patient generated health data
- Secure messaging
- Visit summary/clinical summary
- Patient education

Improving Care Coordination

Improving Population and Public Health



Cluster Detail	
Survey Definition Name	User Name
Consumer eHealth Readiness Tool (CeRT)	rmlajanian@gmail.com
Meaningful Use 2	
13	Consumer Education & Support Reminders- Consumer receives electronic reminders for preventive screening and follow-up care based on clinically relevant information (Meaningful Use 2 Core Objective for Eligible Providers) Answer: Yes, Full
46	CPOE Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders (Meaningful Use 2 Core Objective for Eligible Providers/Eligible Hospital & CAHs) Answer: Yes, In development

Cluster Detail	
Survey Definition Name	User Name
Consumer eHealth Readiness Tool (CeRT)	rmlajanian@gmail.com
Meaningful Use 2 and MU3 Rec 2014- With Change	
26	Access to Information Consumers can view online, download and transmit their health information within four business days of it being available to an eligible provider or 36 hours after discharge from the hospital (Meaningful Use 2 Core Objective for Eligible Providers/Eligible Hospital & CAHs and MU3 Rec 2014 with change to make available within 24 hours ) Answer: Yes, Full
36	Consumer Education & Support Targeted Educational Materials-Consumer receives consumer -specific educational materials generated from the EHR based on their information (Meaningful Use 2 Core Objective for Eligible Providers/Eligible Hospitals & CAHs and MU3 Rec 2014 with change in preferred language and media) Answer: Yes, Full

*\*Source: Health IT Policy Committee Office for the National Coordinator HIT*

# Consumer eHealth Readiness Tool (CeRT)™ powered by HealthCAWS

Organizational  
Assessment

Progress  
Reports

Resource  
Center

Solutions  
Directory

**Question 40**  
Engaged Consumer Please rate your organization's stage of implementation for each aspect of engaged consumers to take action. All items are rated on the following scale unless otherwise noted: -No, out of scope (for at least next 2-3 years) -No, have not initiated but in scope Yes, in development (to implement within 12 months) -Yes, partial implementation (pilot or subset of activities) -Yes, fully implemented

**Question 41**  
Access to Information-Downloadable record  
Yes, In development

**Question 42**  
Access to Information-Consumer controlled transmittable record (e.g. to other providers or personal supports)  
No, Would consider

**Question 43**  
Access to Information-Consumer generated data integrated into record  
Yes, In development

**Question 44**  
Access to Information-Consumer generated data viewable by consumer as part of record  
Yes, In development

**Question 45**  
Access to Information-Access to information by consumer  
Yes, In development

**Question 46**  
Access to Information- Search of information by consumer  
Yes, Partial

**Question 47**  
Transaction-based Forms- Consumer generated forms (e.g. consent, release, etc.)  
Yes, Partial

Welcome to your CeRT powered by HealthCAWS

Welcome to your CeRT powered by HealthCAWS. Here you will be able to take your assessment, access your assessment history, progress reports, and resource library to help advance consumer engagement and meaningful use of health information technology. In addition, you can access our solutions directory including HIMSS supporters that offer a wide array of products and services that may be of interest to you.

We thank you for your commitment to advancing consumer engagement and high quality, affordable health care.

[CeRT Instructions](#)  
\*Inclusion in the solutions directory does not represent a certification of or responsibility for the products and services by HIMSS or HealthCAWS

**HealthCAWS® Organizational 6 Step Quality Improvement Process**

Organize Your Team  
Define your responsible lead and team

Complete Initial Assessment  
Document your baseline status

Get Real Time  
Analyze 3 levels summary, detail Home

My... Assessments GO

My... Progress Reports Summary GO

My... Progress Reports Details GO

My... Opportunities Report GO

My... My MU Cluster Report GO

My... Resource Center GO

My... Solutions Directory GO

Accountability and Support Resource Center

Engagement Tools

Infrastructure Supports

Measures & Evaluation

ONC EHRs Taking the First Step

ONC Achieving Meaningful Use

CMS Meaningful Use

ONC Blue Button+

ONC Blue Button+ Implementation Guide

ONC Blue Button+ Privacy

ONC Local EHR Implementation Support-RECs

Hospitals in Pursuit of Excellence- Leadership Guide

NCQF The ABCs of Measurement

NCQF HHS Measure Authoring Tool

NCQF Care Coordination Measures

HHS National Quality Strategy

CMS Core Quality Measures

CMS Core Quality Measures Tip Sheet

CMS Core Quality Measures Adult 2014

CMS Core Quality Measures Pediatric 2014

Summary Report

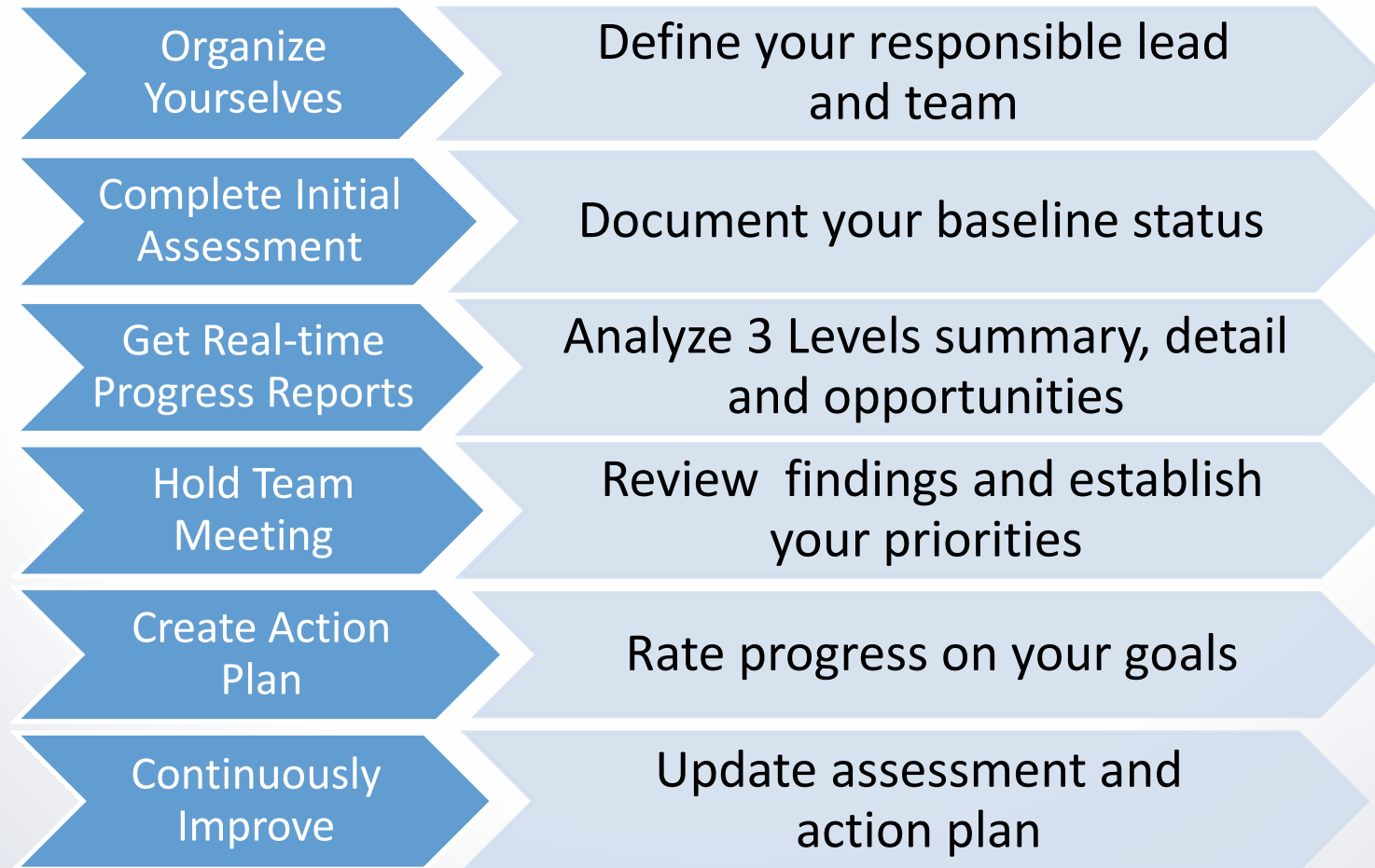
Consumer eHealth Readiness

1. Informed Consumer	31 of 32	Excellent. You have indicated that your organization is approaching or has made maximal progress on efforts to advance informing consumers. For additional resources on advancing your consumer engagement strategy, please click <a href="#">HERE</a> .
a.Consumer Education & Support	4 of 4	
b.Access to Information	8 of 8	
c.Transaction-based Forms	11 of 12	

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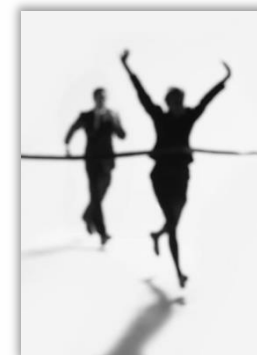


# HealthCAWS® Organizational 6 Step Quality Improvement Process



# What CeRT Brings to Kentucky?

- Leadership in consumer engagement
  - 2013-2014 KHIE initiated 2 phases of users ranging from small provider groups to large hospitals; next group PHR users will do before and after
- Provider pathway to MU Stages 2/3
- Enable incentive funds quicker
- Lower costs
  - Avoid staff FTE or consultant expenses
  - Mapped to conceptual model for consumer engagement, no need to reinvent theory or context
  - Ease of use, iterative, and comprehensive-high acceptability ratings
- “CeRT is cost effective: ROI from week one” Gary Ozanich PhD, NKU Professor and KHIE Budget Committee Member



# Discussion

## THANK YOU.

For questions, please contact :

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